

10-582500

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 = *	
INDEPENDENT CLAIMS	minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY
RATE	FEES
BASIC FEE	385.00
X\$ 9=	
X43=	
+145=	
TOTAL	<input type="checkbox"/>
OR	OR
RATE	FEES
BASIC FEE	770.00
X\$18=	
X86=	
+290=	
TOTAL	<input type="checkbox"/>

6-9-06 CLAIMS AS AMENDED - PART II

AMENDMENT A		(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 16	Minus	** 20	=
Independent	* 4	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
X\$ 9=	
X43=	<input checked="" type="checkbox"/>
+145=	
TOTAL ADDIT. FEE	<input type="checkbox"/>
OR	OR
RATE	ADDITIONAL FEE
X\$18=	<input checked="" type="checkbox"/>
X86=	<input checked="" type="checkbox"/>
+290=	
TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT B		(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

	ADDITIONAL FEE	ADDITIONAL FEE
RATE		
X\$ 9=		
X43=		
+145=		
TOTAL ADDIT. FEE	<input type="checkbox"/>	<input type="checkbox"/>
OR	X\$18=	
OR	X86=	
OR	+290=	
TOTAL ADDIT. FEE	<input type="checkbox"/>	<input type="checkbox"/>

AMENDMENT C		(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

	ADDITIONAL FEE	ADDITIONAL FEE
RATE		
X\$ 9=		
X43=		
+145=		
TOTAL ADDIT. FEE	<input type="checkbox"/>	<input type="checkbox"/>
OR	X\$18=	
OR	X86=	
OR	+290=	
TOTAL ADDIT. FEE	<input type="checkbox"/>	<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.